ATTORNEY'S DOCKET NUMBER
PU3556USW

I hereby claim the benefit under 35, U.S.C. §120 of any United States application or §365(c) of any PCT international application designating the United States of America that is listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. §1.56 which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:

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POWER the U.S. P	OF ATTORNEY: A atent and Trademark	s a named inventor, I hereby appoir Office connected therewith. (List name	nt the follow ame and reg	ving attorney(s) and gistration number)	d/or agent(s) to pros	ecute this application a	nd transact all business in
Kare Rob	id J. Levy rles E. Dadswell en L. Prus ert H. Brink abeth Selby	Reg. No. 27,655 Reg. No. 35,851 Reg. No. 39,337 Reg. No. 36,094 Reg. No. 38,298	Frank P. Christop	C. Bennett R Grassler R her P. Rogers R	eg. No. 39,009 eg. No. 37,092 eg. No. 31,164 eg. No. 36,334 eg. No. 38,181	Bonnie L. Deppenbro John L. Lemanowicz	Reg. No. 28,209 Reg. No. 37,380
Send Co	orrespondence to: David J. Levy, Pate Global Intellectual Glaxo Wellcome In Five Moore Drive, Research Triangle	ent Counsel Property Department DEPARTMENT PO Box 13398	PATE	23347 NT TRADEMARK-OFF	TO THE PARTY OF TH		lls to: ner P. Rogers 183-1240
	and belief are be statements and t willful false stat	that all statements made here elieved to be true; and further he like so made are punishable ements may jeopardize the va	that these le by fine alidity of	e statements we or imprisonme the application	re made with the nt, or both, unde	e knowledge that wer 18 U.S.C. 1001, uing thereon.	rillful false and that such
) 2	FULL NAME OF INVENTOR	FAMILY NAME DOW		rst given name Lordon		SECOND GIVEN NAME. J.	INITIAL '
2	INVENTOR'S SIGNATURE	x Holan M				X USA	April 4, 2001
0	RESIDENCE & CITIZENSHIP	CITY Petaluma	···- <u>-</u>	STATE OR FOREIG	N COUNTRY	COUNTRY OF CITIZEN	SHIP
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2	FULL NAME	FAMILY NAME JOHNSON		FIRST GIVEN NAM Keith	E	SECOND GIVEN NAME Arthur	INITIAL
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	SIGNATURE						
0	RESIDENCE & CITIZENSHIP	спу Durham		rate or foreign c IC	OUNTRY	US COUNTRY OF CITIZEN	SHIP
2	POST OFFICE ADDRESS	POST OFFICE ADDRESS GlaxoSmithKline Five Moore Drive, PO Box 1339	8	Research Tr	iangle Park	NC 27709, US	UNTRY
2	FULL NAME OF INVENTOR	FAMILY NAME KELLY	F	rst given name rances		SECOND GIVEN NAME Furr	INITIAL
	INVENTOR'S SIGNATURE						
0	RESIDENCE & CITIZENSHIP	CITY Durham		TATE OR FOREIGN C	OUNTRY	COUNTRY OF CITIZEN	SHIP
3	POST OFFICE ADDRESS	POST OFFICE ADDRESS GlaxoSmithKline Eige Moore Drive PO Por 1320	c F	TTY Research Trian	gle Park	STATE & ZIP CODE/CO NC 27709, US	UNTRY

ATTORNEY'S DOCKET NUMBER

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I hereby claim the benefit under 35, U.S.C. §120 of any United States application or §365(c) of any PCT international application designating the United States of America that is listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. §1.56 which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:

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		As a named inventor, I hereby ap Office connected therewith. (L			secute this application a	nd transact all business ir
Day	rid J. Levy	Reg. No. 27,655	James P. Riek	Reg. No. 39,009	Ronnie I Dennenhri	ock Reg. No. 28,209
	rles E. Dadswell	Reg. No. 35,851	Virginia C. Bennett	Reg. No. 37,092	John L. Lemanowicz	
111	en L. Prus	Reg. No. 39,337	Frank P.Grassler	Reg. No. 31,164		
	ert H. Brink	Reg. No. 36,094	Christopher P. Rogers	Reg. No. 36,334		
112 <u>ال</u> طائية	abeth Selby	Reg. No. 38,298	Lorie Ann Morgan	Reg. No. 38,181		
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	orrespondence to:		 	11 (11) (41)	Direct Telephone Ca	uis w.
C	David J. Levy, Pate Global Intellectual	ent Counsel Property Department			Christopl	her P. Rogers
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=	Research Triangle	Park, NC 27709	PATENT TRADEMAR	K OFFICE		
	willful falce ctat					and that such
	FULL NAME	ements may jeopardize the	e validity of the applicate		suing thereon.	
	FULL NAME OF INVENTOR					
þi	FULL NAME OF INVENTOR INVENTOR'S	FAMILY NAME	FIRST GIVEN NA		SECOND GIVEN NAME	
2	FULL NAME OF INVENTOR INVENTOR'S SIGNATURE	FAMILY NAME DOW	FIRST GIVEN NA Gordon	ме	SECOND GIVEN NAME J.	/INITIAL
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2	FULL NAME OF INVENTOR INVENTOR'S SIGNATURE RESIDENCE & CITIZENSHIP	CITY Petaluma POST OFFICE ADDRESS Dow Pharmaceutical S	FIRST GIVEN NA Gordon STATE OR FO CA CITY	ME OREIGN COUNTRY	SECOND GIVEN NAME J. COUNTRY OF CITIZEN US	/INITIAL
2	FULL NAME OF INVENTOR INVENTOR'S SIGNATURE RESIDENCE & CITIZENSHIP POST OFFICE	CITY Petaluma POST OFFICE ADDRESS Dow Pharmaceutical S 1330A Redwoodway	FIRST GIVEN NA Gordon STATE OR FO CA CITY	ME OREIGN COUNTRY	SECOND GIVEN NAME J. COUNTRY OF CITIZEN US STATE & ZIP CODE/CO	/INITIAL
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ATTORNEY'S DOCKET NUMBER

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	ert H. Brink abeth Selby	Reg. No. 36,094 Reg. No. 38,298		her P. Rogers nn Morgan	Reg. No. 36,334 Reg. No. 38,181		
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	and belief are be statements and the willful false state	that all statements ma lieved to be true; and he like so made are pu ements may jeopardiz	further that these mishable by fine e the validity of	e statements or imprison the applicati	were made with the ment, or both, und on or any patent is	ne knowledge that we are 18 U.S.C. 1001, suing thereon.	villful false and that such
<u>1</u> =1	FULL NAME OF INVENTOR INVENTOR'S SIGNATURE	PAMILY NAME DOW		irst given nam Gordon	IE .	J.	/INITIAL
0	RESIDENCE & CITIZENSHIP POST OFFICE	CITY Petaluma POST OFFICE ADDRESS		CA CITY	REIGN COUNTRY	COUNTRY OF CITIZEN US STATE & ZIP CODE/CO	
1	ADDRESS	Dow Pharmaceutic 1330A Redwoodwa		Petaluma		CA 94954, US	
2	FULL NAME OF INVENTOR INVENTOR'S SIGNATURE	JOHNSON		FIRST GIVEN	NAME	SECOND GIVEN NAME Arthur	
0	RESIDENCE & CITIZENSHIP POST OFFICE	Durham POST OFFICE ADDRESS		TATE OR FOREIG		US STATE & ZIP CODE/CO	
2	ADDRESS FULL NAME	GlaxoSmithKline Five Moore Drive, PO E FAMILY NAME		Research IRST GIVEN NAM	Triangle Park	NC 27709, US	INITIAL
300	OF INVENTOR INVENTOR'S SIGNATURE	KELLY MAME		rances		Furr	3, 2001
0	RESIDENCE & CITIZENSHIP	Ducham POST OFFICE ADDRESS	1 -	TATE OR FOREIGNC	COUNTRY	COUNTRY OF CITIZEN US STATE & ZIP CODE/CO	SHIP
3	POST OFFICE ADDRESS	GlaxoSmithKline	F		/ iangle Park	NC 27709, US	UN I KY



COMBINED DECLARATION FOR UTILITY or DESIGN ATTORNEY'S DOCKET NUMBER **PU3556USW** PATENT APPLICATION WITH POWER OF ATTORNEY Continued FAMILY NAME FIRST GIVEN NAME SECOND GIVEN NAMEZINITIAL FULL NAME William **LATHROP** OF INVENTOR Robert STATE OR FOREIGN COUNTRY **INVENTOR'S** attend 2001 **SIGNATURE** COUNTRY OF CITIZENSHIP 0 **RESIDENCE &** CITIZENSHIP **Fort Collins** POST OFFICE ADDRESS CITY STATE & ZIP CODE/COUNTRY POST OFFICE 4 **ADDRESS** GlaxoSmithKline Research Triangle Park NC 27709, US Five Moore Drive, PO Box 13398 FAMILY NAME FIRST GIVEN NAME SECOND GIVEN NAME/INITIAL FULL NAME **RAJAGOPALAN** 2 OF INVENTOR Rukmini **INVENTOR'S SIGNATURE** CITY STATE OR FOREIGN COUNTRY CC CONTRY OF CITIZENSHIP 0 RESIDENCE & Durham NC CITIZENSHIP US POST OFFICE ADDRESS POST OFFICE CITY STATE & ZIP CODE/COUNTRY GlaxoSmithKline Research Triangle Park NC 27709, US ADDRESS 5 Five Moore Drive, PO Box 13398

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2	FULL NAME OF INVENTOR	FAMILY NAME LATHROP	FIRST GIVEN NAME Robert	SECOND GIVEN NAME/INITIAL William
	INVENTOR'S SIGNATURE			
0	RESIDENCE & CITIZENSHIP	Fort Collins	STATE OR FOREIGN COUNTRY CO	US
4	POST OFFICE ADDRESS	POST OFFICE ADDRESS GlaxoSmithKline Five Moore Drive, PO Box 13398	Research Triangle Park	NC 27709, US
(A)	FULL NAME OF INVENTOR	FAMILY NAME RAJAGORALAN	FIRST GIVEN NAME Rukmini	SECOND GIVEN NAME/INITIAL
Pul	INVENTOR'S SIGNATURE	Majagopalen		X10APR2001
0	RESIDENCE & CITIZENSHIP	Durham Durham	NC STATE OR FOREIGN COUNTRY	US
5	POST OFFICE ADDRESS	FOST OFFICE ADDRESS GlaxoSmithKline Five Moore Drive, PO Box 13398	Research Triangle Park	NC 27709, US

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		CLARATION FOR "371" A	PPLICATION	
		RATION FOR UTILITY OF		ATTORNEY'S DOCKET PU3556USW
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(X) Dec	laration submitted with initia	I filing or		Complete if known: App No.:
()Decla	ration submitted after initial	filing (surcharge required 37CFR1.16(e))		
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				Group Art Unit:
	As below name	l inventor. I hereby declare that:		
	My residence, post office	address and citizenship are as stated bel	ow next to my name.	
		l, first and sole inventor (if only one named below) of the subject matter which is cl		
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C) 	[]is attached hereto. OR			
### ****	[x] was filed on 20 Oct	ober 1999 as United States application S	Serial No or PC	[International
	Application Number PC applicable)	T/GB99/03472 filed and was amended of	on (MM/DD/YYYY)	(if
+m5		reviewed and understand the contents of dment specifically referred to above.	the above-identified specification	, including the claims,
	I acknowledge the duty t	o disclose information which is material	to patentability as defined in 37 C	FR §1.56.
	or inventor's certificate o United States of America	iority benefits under 35, U.S.C. §119 (a) r 365(a) of any PCT international applica, listed below and have also identified beicate or of any PCT international applica:	ation which designated at least one clow, by checking the box, any for	e country other than the reign application for
		RIORITY CLAIMS UNDER 35 U.S.C		
Prior	Foreign Application Number (s)	Country	Foreign Filing Date (MM/DD/YYYY))	PRIORITY CLAIMED
1. 9823		GB	22 October 1998	X
2.				
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	claim the benefit under T	itle 35, United States Code §119(e) of an	I ny United States provisional applic	cation(s) listed below:

Filing Date (MM/DD/YYYY) Application No. 2. 3. 4. 5.



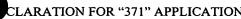
ATTORNEY'S DOCKET NUMBER COMBINED DECLARATION FOR UTILITY or DESIGN **PU3556USW** PATENT APPLICATION WITH POWER OF ATTORNEY Continued SECOND GIVEN NAME/INITIAL FAMILY NAME FIRST GIVEN NAME FULL NAME **LATHROP** William Robert 2 OF INVENTOR INVENTOR'S **SIGNATURE** STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP CITY 0 RESIDENCE & **Fort Collins** CO CITIZENSHIP POST OFFICE ADDRESS STATE & ZIP CODE/COUNTRY POST OFFICE NC 27709, US GlaxoSmithKline Research Triangle Park 4 **ADDRESS** Five Moore Drive, PO Box 13398 **FULL NAME** FAMILY NAME FIRST GIVEN NAME SECOND GIVEN NAME/INITIAL **RAJAGOPALAN** Rukmini 2 OF INVENTOR INVENTOR'S **SIGNATURE** CITY STATE OR FOREIGN COUNTRY CO: INTRY OF CITIZENSHIP 0 RESIDENCE & NC Durham US CITIZENSHIP POST OFFICE ADDRESS CITY STATE & ZIP CODE/COUNTRY POST OFFICE GlaxoSmithKline Research Triangle Park NC 27709, US 5 **ADDRESS** Five Moore Drive, PO Box 13398

	BINED DECLAR LICATION WITH			R DESIGN PATENT	ATTORNEY'S DOCKET PU3556USW First Names Inventor: Gordon J. DOW
(X) Dec	laration submitted with initia	l filing or			Complete if known: App No.:
()Decla	aration submitted after initial	filing (surcharge re	equired 37CFR1.16(e))		Filing Date
					Group Art Unit:
	As below named	l inventor. I here	by declare that:		
	My residence, post office	address and citiz	zenship are as stated belo	ow next to my name.	
				e is listed below) or an original, fairmed and for which a patent is so	
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	I hereby claim foreign pr or inventor's certificate of United States of America	iority benefits un r 365(a) of any Po , listed below and icate or of any PO	der 35, U.S.C. §119 (a)- CT international applica I have also identified be	o patentability as defined in 37 C (d) or §365(b) of any foreign app tion which designated at least one low, by checking the box, any for tion having a filing date before th	plications(s) for patent e country other than the reign application for
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1. 9823	036.0		GB	22 October 1998	X
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COMBINED DECLARATION FOR UTILITY or DESIGN ATTORNEY'S DOCKET NUMBER **PU3556USW** PATENT APPLICATION WITH POWER OF ATTORNEY Continued FULL NAME FAMILY NAME FIRST GIVEN NAME SECOND GIVEN NAME/INITIAL **LATHROP** William 2 OF INVENTOR Robert INVENTOR'S **SIGNATURE** STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP 0 **RESIDENCE & Fort Collins** CITIZENSHIP CO US POST OFFICE ADDRESS STATE & ZIP CODE/COUNTRY POST OFFICE 4 **ADDRESS** GlaxoSmithKline Research Triangle Park NC 27709, US Five Moore Drive, PO Box 13398 **FULL NAME** FAMILY NAME FIRST GIVEN NAME SECOND GIVEN NAME/INITIAL **RAJAGOPALAN** Rukmini 2 OF INVENTOR **INVENTOR'S SIGNATURE** STATE OR FOREIGN COUNTRY CITY COUNTRY OF CITIZENSHIP RESIDENCE & 0 CITIZENSHIP Durham NC US POST OFFICE ADDRESS CITY STATE & ZIP CODE/COUNTRY POST OFFICE GlaxoSmithKline Research Triangle Park NC 27709, US 5 **ADDRESS** Five Moore Drive, PO Box 13398





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AIII	EICATION WITH	TOWER (or Alloudel		First Names Inventor: Gordon J. DOW	
					Complete if known	<u>::</u>
(X) Dec	laration submitted with initial	filing or			App No.:	
()Decla	aration submitted after initial	filing (surcharge re	equired 37CFR1.16(e))			
					Filing Date	
					Group Art Unit:	
	As below named	l inventor. I here	by declare that:			
	My residence, post office	address and citiz	zenship are as stated belo	ow next to my name.		
				e is listed below) or an original, aimed and for which a patent is s		
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	[]is attached hereto. OR					
₽	[x] was filed on 20 Oct	ober 1999 as Un	nited States application S	Serial No or PC	T International	
	Application Number PC applicable)	T/GB99/03472 f	iled_and was amended o	n (MM/DD/YYYY)	(if	
SS.	I hereby state that I have as amended by any amen			the above-identified specificatio	n, including the claim	1S,
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	or inventor's certificate of United States of America	r 365(a) of any P , listed below and icate or of any PG	CT international applicad have also identified be	e(d) or §365(b) of any foreign ap tion which designated at least or low, by checking the box, any for tion having a filing date before the	e country other than preign application for	the
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2	FULL NAME OF INVENTOR	FAMILY NAME LATHROP	FIRST GIVEN NAME Robert	SECOND GIVEN NAMEZINITIAL William
	INVENTOR'S SIGNATURE			
0	RESIDENCE & CITIZENSHIP	Fort Collins	STATE OR FOREIGN COUNTRY CO	COUNTRY OF CITIZENSHIP US
4	POST OFFICE ADDRESS	POST OFFICE ADDRESS GlaxoSmithKline Five Moore Drive, PO Box 13398	Research Triangle Park	NC 27709, US
2	FULL NAME OF INVENTOR	RAJAGOPALAN	FIRST GIVEN NAME Rukmini	SECOND GIVEN NAME/INITIAL
	INVENTOR'S SIGNATURE			
0	RESIDENCE & CITIZENSHIP	CITY Durham	NC	COUNTRY OF CITIZENSHIP US
5	POST OFFICE ADDRESS	POST OFFICE ADDRESS GlaxoSmithKline Five Moore Drive, PO Box 13398	Research Triangle Park	NC 27709, US

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	MBINED DECLAR LICATION WITH			R DESIGN PATENT	PU355	NEY'S DOCKET 66USW nes Inventor:
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()Dec	laration submitted after initial f	iling (surcharge r	equired 37CFR1.16(e))		Filing 1	Date
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	As below named	inventor. I here	eby declare that:			
	My residence, post office	address and citi	zenship are as stated belo	ow next to my name.		
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	or inventor's certificate or United States of America,	365(a) of any P listed below an cate or of any P	PCT international applicad have also identified be	e(d) or §365(b) of any foreign ap ation which designated at least or slow, by checking the box, any for tion having a filing date before the	ne country oreign app	other than the lication for
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ATTORNEY'S DOCKET NUMBER

PU3556USW

I hereby claim the benefit under 35, U.S.C. §120 of any United States application or §365(c) of any PCT international application designating the United States of America that is listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. §1.56 which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:

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nd C	Correspondence to:	·	11 11 1	10 11000 11100 11150 ECETIO	in m	Direct Telephone C	alls to:
Hans Tank	David J. Levy, Pat	ent Counsel Property Department nc. PO Box 13398	PATE	23347			oher P. Rogers 483-1240
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	As below named	d inventor. I here	eby declare that:			
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I hereby claim the benefit under 35, U.S.C. §120 of any United States application or §365(c) of any PCT international application designating the United States of America that is listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. §1.56 which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:

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End Correspondence to: David J. Levy, Patent Counsel Global Intellectual Property Department Glaxo Wellcome Inc. Five Moore Drive, PO Box 13398 Research Triangle Park, NC 27709			23347			Christopher P. Rogers 919-483-1240	
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